Simplified Ex-Post Evaluation for Technical Cooperation Project

Evaluator, Affiliation	Akihiro Nakagome, Hideyuki Takagi Ernst & Young Advisory Co., Ltd.	Duration of Evaluation Study	
Project Name	The Project for the Quality Tuberculosis Control Programme	February 2010 – December 2010	

I Project Outline

1 Troject Outline				
Country Name	Republic of the Philippines			
Project Period	September 2002-August 2007			
Executing Agency	The Infectious Diseases Office of the Department of Health (DOH-IDO); Research Institute on Tropical Medicine, National Tuberculosis Reference Laboratory (NTRL); and Center for Health Development			
Cooperation Agency in Japan	The Ministry of Health, Labour and Welfare and the Research Institute Tuberculosis, Japan Anti-Tuberculosis Association			
Total Cost	563 million yen			
Related Projects (if any)	Public Health Project (September 1992-August 1997), Tuberculosis Control Project (September 1997-August 2002), and construction of the National Tuberculosis Reference Laboratory (NTRL) (March 2002)			
Overall Goal	Tuberculosis (TB) in the Republic of the Philippines is controlled.			
Project Objective(s)	Quality NTP (National Tuberculosis Control Program) is sustainably managed.			
Output[s]	 Quality DOTS (Directly Observed Treatment, Short-course) implementation is ensured through capacity building activities and a strengthened monitoring and supervision system. Quality laboratory services become available nationwide due to the formation of networks for sputum examinations. Capability to plan and conduct Operations Research (OR) is strengthened to monitor the TB control program. 			
	Inputs (Japanese Side)	Inputs (Philippine Side)		
Experts	5 for Long term, 50 for Short term	Staff allocated	18	
Equipments	87 million yen	Equipments	-	
Local Cost	74 million yen	Local Cost	29 million pesos	
Trainees Received	13	Land etc provided	Offices, facilities and equipment for experts	
Others	-	Others	-	

II Result of the Evaluation

Summary of the evaluation

The project was carried out in an efficient manner. With regard to outputs produced, the objectives were achieved generally as planned for each of the objectives: the enhanced ability to implement quality DOTS; strengthened networks for sputum examinations; and improved ability to conduct operations research for monitoring the TB control program. As a result, indicators of the project objectives - improvements in the national recovery rate of tuberculosis and discovery rate of TB patients - were generally satisfied. On the other hand, data concerning the overall goal, a reduction by half in the indicators for TB problems, at the time of the ex-post evaluation were unavailable in the survey. However, statistical data from the World Health Organization (WHO) shows that the mortality rate for tuberculosis marked a significant decline, even though it fell short of a 50% reduction, which confirms the partial contribution that this project has made. Despite the tendency for insufficient budgets to be appropriated for TB control programs, the counterparts maintained their role and activities even after the program finished.

In light of the above, this project is evaluated to be highly satisfactory.

1 Relevance

(1) Relevance with the Development Plan of the Philippines

The Philippines is one of the major TB-infected countries in the world. In the National Objectives for Health (1999-2004), announced in 1999, a 50% reduction in the morbidity rate, the mortality rate and occurrence of complications from TB was set as the target. The Medium-term Philippines Development Plan (2004-2010) points out that tuberculosis as one of the critical diseases to be tackled, with a discovery rate of 70% and a recovery rate of 85% among the sputum smear-positive patients designated as targets.

(2) Relevance with the Development Needs of the Philippines

From the beginning of the project to its end, the Philippines saw tuberculosis ranked sixth in the morbidity rate among the diseases affecting humans. (The country had 114,000 patients, or a morbidity rate of 143 patients per 100,000 people in 2002, and as many as 114,000 patients, or a morbidity rate of 136 patients per 100,000 people in 2007.)

(3) Relevance with Japan's ODA Policy

This project is relevant to the basic policy of the aid plan for the Philippines. Aid for the health sector is regarded as an important field, and TB is pointed out as one of the particularly important issues in the health sector.

This project has been highly relevant with the Philippines' development plan, development needs, as well as Japan's ODA policy, therefore its relevance is high.

2 Effectiveness / Impact

(1) Achievement of Project Outputs and Project Objective(s)

In this project, each of the objectives - enhanced ability to implement quality DOTS, strengthened networks for sputum examinations, and improved ability to conduct operations research for monitoring the TB control program- were achieved generally as planned. The national recovery rate for tuberculosis rose from 75% in 2002 to 82% in 2006 (against a target of 85% or more), and so did the discovery rate of patients from 57% in 2002 to 75% in 2006 (against a target of 70% or more), part of which can be attributed to the contribution this project made.

(2) Achievement of Overall Goal, Intended and Unintended Impacts

As data concerning the overall goal, a 50% reduction in the TB morbidity and mortality rates, was unavailable at the time of the ex-post evaluation, the level of achievement in these indicators could not be judged. However, statistical data from the World Health Organization (WHO) shows that the TB mortality rate fell from a ratio of 58 deaths per 100,000 people in 2000 to a ratio of 41 deaths per 100,000 people in 2007, and the TB mortality rate in 2010 is forecasted to decline further to a ratio of 34 deaths per 100,000 people, which is a remarkable decline despite the failure to reach the target of a 50% reduction.

This project has largely achieved its objectives, therefore its effectiveness is high.

3 Efficiency

(1) Outputs

As described above in (1) of "Effectiveness / Impact", this project produced the outputs generally as planned.

(2) Elements of Inputs

The inputs into this project were provided as stated in the "Project Outline."

(3) Project Period of Cooperation

The project period, 60 months in the plan, actually ended in 60 months, just as planned (100% of the plan).

(4) Project Cost of Cooperation

The project cost, ¥540 million in the plan, actually totaled to ¥513 million, lower than planned (95% of the plan).

The inputs were appropriate for producing the outputs and achieving the project objectives, therefore the efficiency of the project is high.

4 Sustainability

(1) Related Policy towards the Project

As the Medium-term Philippine Development Plan (2004-2010) again points out that TB control measures are an important policy for the health sector, the policy has high sustainability. The central government of the Philippines maintains a strong commitment to NTP. Now that the methods of implementing TB control measures transferred to the country in this project are reflected in the NTP, the central government will continue carrying out anti-TB measures according to a revised version of the "Manual of Procedures 2005, 4th edition."

(2) Institutional and Operational Aspects of the Executive Agency

Since many of the counterparts are still engaged in the NTP, the same roles and activities are maintained as at the implementation stage of the project. Presently, in the Philippines Programmatic Management for Drug Resistant Tuberculosis (PMDT) an issue is that DOH-IDO and NTRL also deal with an increasing number of PMDT-related tasks.

(3) Technical Aspects of the Executive Agency

The counterparts have maintained the skills to offer touring guidance on DOTS to public health centers and to conduct sputum smear examinations, and these activities are regularly conducted. Training for touring guidance on DOTS and sputum smear examinations is also provided.

(4) Financial Aspects of the Executive Agency

Budgets appropriated to the NTP and local government TB control measures tend to be insufficient at present, and they will remain so in the near future. According to responses from the counterparts to the questionnaires, in order to support the implementation of the NTP at the local level, it is necessary to increase the Provincial Investment Plan for Health (PIPH).

(5) Continuity of Effectiveness and Impact

Data for 2007 has not been obtained. Data at the end of the project suggests that most of the project objectives have been achieved. As stated above in terms of the overall goal, the indicators for TB problems are on a downward trend, a fact that indicates that the effects of the project have presumably been maintained.

In light of the above, in the decentralized health sector, the steady appropriation of the budget required for TB control measures at the local government level is still an issue to be addressed, and therefore, the sustainability of the project effects is fair.				